Psychology Internship Program



Alexandria VA Health Care System

Psychology Training Program Psychology Service (116B) 2495 Shreveport Highway Pineville, Louisiana 71360

(318) 466-2598 http://www.alexandria.va.gov/ Leslie.Drew@va.gov



MATCH Number: 234811 - GENERAL INTERNSHIP

Accreditation Status

The psychology internship at the Alexandria Veterans Affairs Health Care System (AVAHCS) is a new program and we are not currently an APPIC member or APA accredited.

It is important to note that because this is a VA internship, graduates from this program will be eligible for VA postdoctoral fellowships and VA staff positions, even though the internship is not accredited, given they meet all other requirements for employment in the Psychology Occupational Service and Federal Service.

It is our intention to provide a psychology internship that provides quality training in professional psychology that will prepare interns for postdoctoral positions or positions within the VA.

Application & Selection Procedures

REQUIREMENTS FOR PROGRAM ENTRY

The program actively recruits students from diverse ethnic and cultural groups. Individuals with disabilities are also strongly encouraged to apply. As the Department of Veterans Affairs, we strongly encourage qualified veterans to apply.

The minimum requirements for entry into the training program are as follows:

- 1. Applicants must be U. S. citizens.
- 2. At the time of application, applicants must be enrolled in doctoral training in an APA-accredited clinical or counseling psychology doctoral program.
- 3. Applicants must have completed a minimum of 550 hours of supervised practicum experience (intervention and assessment) by the time the application is submitted.
- 4. Applicants must have passed all comprehensive examinations required by their graduate program by the application deadline.
- 5. Applicants are required to have completed their dissertation proposal prior to the application deadline.

APPLICATION PROCEDURES

In order to apply for the Alexandria VA Health Care System's Psychology Internship, you must:

- Register for the APPIC Match through National Matching Services (http://www.natmatch.com/psychint)
- 2. Complete the APPIC Application for Psychology Interns (AAPI) Online, including a cover letter, three letters of recommendation, a curriculum vita, and graduate transcripts.
- 3. Send a cover letter describing your interest in the Psychology Internship at the Alexandria VA Health Care System (see below for contact and address).
- 4. Ensure that all application materials reach us by December 1, 2015.

Phase I Match Day is Friday, February 19, 2016. Offers of acceptance will be made in agreement with the guidelines developed by the Association of Psychology Postdoctoral and Internship Centers (APPIC). For questions about the APPI Online Application of APPIC Match, please contact APPIC directly at (202) 347-0022 or see their webpage at www.appic.org for more information. This internship site agrees to abide by the APPIC Policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant. We will offer appropriate guidance to all applicants during the application process. We strongly suggest that you apply to this program only if it ranks highly in terms of your personal and professional priorities.

Prior to beginning the internship year, it will be necessary for applicants selected for the internship training program to complete paperwork (e.g., Optional Application for Federal Employment and Declaration of Federal Employment) and training modules as directed. During the training year, interns are responsible for adhering to the policies and procedures of the Psychology Training Program and the Psychology Service and other AVAHCS policies and procedures. Also, many of the laws, rules, and guidelines that apply to federal employees are also applicable to trainees in federal training positions. A copy of the policies and procedures of this training program will be made available to intern applicants at the time of their interview and is provided to each intern during orientation at the beginning of the training year.

All correspondence and application materials should be sent to:

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Psychology Training Program Setting

The Alexandria VA Health Care System (AVAHCS), Alexandria, Louisiana is a Joint Commission accredited, complexity level 3 facility serving Veterans within 23 of Louisiana's 64 parishes. The AVAHCS is located in Pineville, Louisiana with four community based outpatient clinics (CBOCs) in Jennings, Lafayette, Natchitoches, and Fort Polk, Louisiana. A mobile clinic became operational in Lake Charles, Louisiana on June 4, 2012 to serve Veterans until a permanent CBOC is in place which is projected to be operational in 2016. Additionally, the Lafayette CBOC will be undergoing a significant expansion. The population served is a predominantly rural Veteran population. It is categorized as a primary and secondary facility with a full range of primary care, mental health, and specialty services. AVAHCS served 28,771 unique Veteran patients in Fiscal Year 2013 completing 217,458 outpatient visits, 39,643 bed days of care, and 1,779 admissions.

Alexandria VA Health Care System (AVAHCS) has an array of Mental Health Programs that offer comprehensive, interprofessional care to the Veterans of this area and across the state. The Mental Health Product Line encompasses Psychology, Psychiatry, Social Work and Mental Health Nursing. Each service works in collaboration to ensure Veterans receive high quality mental health services. AVAHCS has the largest inpatient psychiatric unit in the state with 30 Acute beds and 35 Intermediate beds. In the outpatient setting, the AVAHCS has programs at the main campus as well as four Community Based Outpatient Centers (CBOC). Outpatient programs include General Mental Health Clinics, PTSD Clinical Team, OEF/OIF/OND Mental Health Team, Substance Use Disorder (SUDs) Team, Suicide Prevention Program, Homeless Program, Mental Health Intensive Case Management Program, Community Residential Care Program, and Vocational Rehabilitation Program. The Mental Health Product Line is integrated into Primary and Specialty Medical Clinics and services such as Primary Care Mental Health Integration, Health Behavior and Disease Prevention Program, and Home-Based Primary Care Program. Additionally, Mental Health provides consultative services to outpatient clinics and inpatient units as needed.

The AVAHCS is also a teaching hospital with training programs for a number of disciplines and provides state-of-the-art technology and education. The Psychology Service at the AVAHCS has provided without compensation (WOC) training to psychology students for the past 24 years. It also provided a training rotation as part of an APA accredited pre-doctoral internship consortium with Central State Hospital and Pinecrest Rehabilitation Center for several years.

Training Model and Program Philosophy

The philosophy of the Internship Training Program mirrors the mission of the Alexandria VA Health Care System in the context of the internship's role as a primary source of experiential training in professional psychology practice. The model of the training program is practitioner-scholar and involves the integration of nomothetic psychological science with the inherently ideographic nature of practice. Our program maintains a generalist focus, fostering general competence over specialization and maintains that recovery-oriented, comprehensive, generalist skills are the foundation for independent, professional mental health practicitioners. Interns will recognize and demonstrate cultural competency as well as utilization of evidence-based practices.

The program is also developmental, initially involving comprehensive orientation, close supervision, and early coverage of core practice issues and gradually transitioning into more autonomous practice, where supervision and didactics address more specific and advanced aspects of practice.

Program Goals & Objectives

Upon successful completion of this internship program, you will be capable of functioning as an entry-level psychologist. This internship is based on generalist training with a focus on exposure to and experience with interprofessional teams and settings. In the context of a generalist training model, we will offer you a series of experiences aimed at the development of Core Professional Competencies.

Although you will receive different training from each of your supervisors, in different settings, and with different patient populations, our intent is to provide you with an overall training program that is sequential, cumulative, and graded in complexity. The Major Rotations are mandatory, but several minor rotations can be selected to create a well-balanced training experience.

Goal #1: Develop intermediate to advanced general professional competencies

Associated Competencies:

- 1. Demonstrates knowledge and application of ethical, legal and professional issues in professional psychology
- 2. Uses supervision productively
- 3. Completes professional tasks in a timely manner and is reliable
- 4. Demonstrates awareness of cultural issues and diversity in professional activities
- 5. Demonstrates that professional activities are informed by scholarly inquiry
- 6. Demonstrates effective management of personal and professional stressors
- 7. Displays professionally appropriate communication and physical conduct across settings
- 8. Accepts responsibility for own actions
- 9. Acts to understand and safeguard the welfare of others
- 10. Displays emerging professional identity; uses resources for professional development
- 11. Demonstrates self-awareness; engages in ongoing self-assessment to evaluate and enhance professional practice

Goal #2: Develop intermediate to advanced professional psychology relational competencies

Associated Competencies:

- 1. Establishes rapport easily with Veterans and collateral supports
- 2. Demonstrates effective communication with other involved providers and/or team members
- 3. Negotiates differences and handles conflict constructively; provides effective feedback to others and receives feedback nondefensively
- 4. Develops and maintains collaborative relationships and respect for other professionals and peers

Goal #3: Develop intermediate to advanced professional psychology intervention competencies

Associated Competencies:

- 1. Demonstrates foundational knowledge of clinical practice in this rotation
- 2. Demonstrates an ability to utilize results of literature review and/or best clinical practices in order to develop a treatment plan that is consistent with the patient's biopsychosocial context, health care setting, and health care system
- 3. Demonstrates the ability to utilize appropriate treatments and modify treatment as needed
- 4. Demonstrates the ability to evaluate treatment effectiveness on an ongoing basis
- 5. Demonstrates skills in flexibility of implementation of empirically supported interventions and/or best clinical practices relevant to relevant diagnoses

Goal #4: Develop intermediate to advanced professional psychology assessment competencies

Associated Competency:

- 1. Demonstrates information gathering skills (e.g., interview of patient and collaterals, eliciting input from other health care providers, chart review, behavioral observations)
- 2. Demonstrates competence in assessing factors relevant to the presenting problems
- 3. Demonstrates competence in the diagnosis of psychiatric disorders
- 4. Demonstrates competence in selection and administration of tests, according to best practices
- 5. Demonstrates competence in interpretation of neurocognitive and/or psychological tests
- 6. Demonstrates awareness of strengths and limitations of administration, scoring, and interpretation of assessment materials
- Identifies practical implications of evaluation results and provides appropriate recommendations
- 8. Demonstrates competence in report writing and written communication skills as appropriate to specific context and role
- 9. Demonstrates competence in verbal communication skills as appropriate to specific context and role

Goal #5: Develop intermediate to advanced psychology professional role competency

Associated Competency:

- 1. Demonstrates knowledge of consultation and the setting's team model of care
- Demonstrates understanding of role-based expectations for consultation and setting's team model of care
- 3. Demonstrates ability to foster a shared conceptualization of the patient's presenting problems with other involved providers and/or team members
- 4. Demonstrates effective communication with other involved providers and/or team members
- Demonstrates ability to collaboratively assess and intervene based on the expected team model of care

Program and Administrative Structure

The major training activity at AVAHCS will be experiential learning through the direct provision of health care services. This will include experience on multiple rotations, allowing a diversity of training experiences in interprofessional treatment teams. Students will also have structured didactic experiences delivered by supervisors and other professional staff. These will include topics presented in a single session and some presented across several sessions in a seminar format. Interns will engage in scholarly inquiry as part of their clinical rotation and didactics, with products shared in the regular intern conference.

Strong Training Emphasis	Moderate Training Emphasis	Not Offered
(You will get this here)	(You can get this here)	(You won't get this here)
Outpatient Treatment	Military Sexual Trauma	Child/Adolescent Treatment
Evidence Based Treatments	Substance Use Disorders	Eating Disorders treatment
Military Trauma & PTSD	Health Psychology	Marital and Family Therapy
Individual Therapy	Home-Based Primary Care	Research
Group Therapy	Traumatic Brain Injury/Polytrauma	Geropsychology
Inpatient Treatment	Neuropsychology	Homelessness
Serious Mental Illness		Personality Disorders
Assessment		

TRAINING YEAR STRUCTURE AND TIME ALLOCATION

The Psychology Internship at AVAHCS is a full-time, one year internship based on a 40-45 hour workweek. Interns will complete 2080 hours of internship training during a twelve month calendar year. We are offering 3 positions for the 2016/2017 training year, which will begin on August 21, 2016. Our training calendar is built around three mandatory rotations, Behavioral Health Interdisciplinary Program, PTSD Clinical Team, and Inpatient Mental Health, lasting four months each. This will account for the bulk of your time, approximately 20-32 hours a week. In addition to the major rotations, there are options for minor rotations in Pain Management, Polytrauma/Post-Deployment, Substance Use Disorders Clinic, and Home-Based Primary Care, which will account for approximately 8-12 hours of your week. This structure with optional rotations allows for both breadth and/or depth of clinical experiences, depending on your individualized training needs and interests. Students will receive a least 4 hours of supervision (with at least 2 hours of individual supervision) per week and are expected to spend a minimum of 12 hours per week spent in administration of face to face psychological services. In addition to clinical rotations, there are times set aside for seminars, staff meetings, and other selected learning experiences.

Psychology Service is a professional and collaborative health care component of the Health Care System at the main facility and all of the community based outpatient clinics (CBOCs), focusing on mental, behavioral, and emotional health and psychological safety as related to our Veteran population. Psychology Consultative Service provides a full range of psychological assessment and therapeutic interventions throughout the medical center and CBOCs. Psychology Service leads the Evidenced Based Practice Program, Smoking Cessation Program, Military Sexual Trauma Program, Substance Use Disorders Program, PTSD Clinical Team, and Therapeutic and Supported Employment Services Programs. Psychologists are also integrated as the mental health provider in all mental health settings and in non-mental health programs and settings such as Community Living Center, Home Based Primary Care, Women's Clinic and Primary Care. Interns will be trained in key values related to shared decision-making between the professional team members and the Veteran patients. The importance of patient preferences will be underscored and illustrated by the routine use of patient education, collaborative goal setting, and standard treatment planning tools.

A portion of the training curriculum will be dedicated to didactic pedagogy and include various activities including group supervision among interns, case presentations, professional seminars in psychological assessment, diagnosis, and therapeutic interventions and ethics. Continuing educational seminars will be offered on a variety of professional topics and include other disciplines (e.g. psychiatry, nursing, social work, pharmacy, occupational therapy, chaplaincy).

Performance improvement is a significant part of the role of a professional psychologist in a VA setting. The proposed training program will involve ongoing performance improvement activities of the service and the settings assigned. Common measures to enhance patient outcomes include measures of access to services, timeliness of documentation, routine suicide risk assessment, development of a treatment plan with identified goals, objectives, and methods of measurement, education and completion of evidence based therapies, tracers of the medical record, and patient satisfaction. In evaluating performance and progress, applicable statutes and policies concerning due process and fair treatment are followed. Copies of evaluation tools and associated policy are available for review during interviews. A written evaluation of performance is completed at the end of each of the three rotation periods. Copies of these rotation evaluations can be forwarded to interns' graduate programs if requested. (Please note, requests from interns' graduate programs to complete additional rating forms provided by the graduate program will be completed only if the requested ratings coincide substantively with the ratings used by the internship program.)

Upon successful completion of the yearlong internship, all interns will receive a certificate that indicates they have completed an internship in "Professional Psychology." In addition, a final letter of evaluation will be sent to each intern's respective academic program indicating he/she has successfully completed the predoctoral internship as partial fulfillment of the requirements for a doctoral degree in clinical or

counseling psychology. The letter will further detail each intern's experiences in the internship training program and provide an overall summary evaluation.

PROGRAM ADMINISTRATION

The Psychology Training Progam houses two training programs: Psychology Internship Training Program and Psychology Practicum Program. The Psychology Training Programs have a designated director. An administrative Training Committee, chaired by the director of training (DOT), meets quarterly to address substantial training needs and review recommendations from identified subcommittees. A Supervisory Subcommittee of the Training Committee, chaired by the Director of Training, is made up of all current supervisors. It meets monthly to monitor the progress of interns on each rotation. This committee attempts to assure continuity of training among various rotations and training settings, and it is responsible for all routine training activities. Final decisions regarding the Psychology Training Program are the responsibility of the Chief of Psychology Service.

FUNDING/LEAVE

The official internship year will begin on August 9, 2016. Interns will be full time employees of the VA. The anticipated stipend is \$23,974, which is taxable. VA interns are eligible for health insurance (for self, spouse, and legal dependents) and life insurance, just as are regular employees. Interns receive 10 annual federal holidays. In addition, interns accrue 4 hours of sick leave and 4 hours of annual leave for each full two-week pay period as an intern, for a total of between 96 and 104 hours of each during the year. Additionally, interns may be granted authorized leave without charge when the activity is considered to be of substantial benefit to VA in accomplishing its general mission or a specific function such as education and training.

Training Experiences

MAJOR MENTAL HEALTH ROTATIONS

Behavioral Health Interdisciplinary Program

General Description: The Behavioral Health Interdisciplinary Program (BHIP) is embedded within the outpatient mental health setting and consists of a team of professional disciplines including: Psychiatry, Psychology, Nursing, Social Work, and Pharmacy. The BHIP staff psychologist would serve as the primary clinical supervisor of the psychology intern rotating through the program and other professionals on the team are also available for consultation. Training would emphasize participation in collaborative relationships and interventions with the interprofessional team. An additional focus would be training in the delivery of appropriate evidence-based psychotherapy interventions in this setting (e.g. motivational interviewing, cognitive processing therapy, social skills training).

The BHIP team rotation is able to provide a variety of training opportunities focusing on general mental health issues of Veterans. Individual psychotherapy, group counseling, couples counseling, as well as evidence-based treatments are made available to Veterans through this BHIP team. The BHIP rotation will provide experience in addressing a wide range of mental health concerns with a diverse population of Veterans. The Veterans that are treated by the BHIP team vary greatly in age, ethnicity, and diagnoses. Mood and anxiety disorders, as well as other psychological, psychiatric, and adjustment problems are commonly addressed in this clinic, affording interns the opportunity for a diagnostically and demographically broad training experience.

Training interns will work closely with supervising psychologists to assess, diagnose, and treat psychological and adjustment disorders of Veterans, doing so with a patient-centered, team-based model of service delivery. Mental health services are delivered to Veterans with high regard to cultural sensitivity, as well as sensitivity to the unique social, generational, and economic struggles facing Veterans. In addition to gaining experience in the delivery of mental health services, interns will also gain

experience in the administrative and supportive duties associated with mental health treatment at the VA and other large health care institutions.

Cognitive Processing Therapy, an evidence-based treatment for PTSD, is available to Veterans through this treatment team, allowing interns in the BHIP rotation to gain valuable experience with this empirically supported treatment. In addition to manualized evidence-based treatment, trainees will gain experience in the art and science of traditional psychotherapy, with Cognitive, Cognitive-Behavioral, Psychosocial, Interpersonal, and integrative treatment modalities commonly utilized. The BHIP rotation will provide valuable experience in treatment planning, and in tracking the therapeutic progress of Veterans under the BHIP team's care.

Regular clinical supervision by licensed doctoral-level psychologists is readily available in the BHIP rotation. Doctoral supervision occurs in both individual and group formats, and is tailored to the specific training needs of the individual trainees. Additionally, the BHIP rotation includes the experience of being part of an interprofessional treatment team, giving insight into other health care disciplines relevant to Veteran's overall care. Veterans who are homeless, physically disabled, victims of trauma, or simply suffering emotionally, both chronically and acutely, are treated by clinicians in the BHIP team. The demographic and diagnostic diversity of the Veterans cared for in the BHIP reflects an ideal generalized training experience for pre-doctoral psychologists.

Potential Training Opportunities:

- 1. Providing services to patients with a variety of disorders, including military and non-military trauma, acute stress reactions, panic/agoraphobia, grief reactions, adjustment to illness, severe character disorders, domestic violence, and mood disorders;
- Coleading and/or leading both psychoeduational and process-oriented groups in the group therapy program;
- Performing intakes and psychiatric screenings;
- 4. Performing psychological evaluations to assist in treatment planning;
- 5. Participating in group and individual psychotherapy and psychoeducation to assist patients in the management of a wide variety of symptoms;
- 6. Participating in evidence based therapies including Cognitive Processing Therapy (CPT) and Social Skills Training;
- 7. Working with the Inpatient Psychiatric Unit, which specializes in treatment of patients who have serious mental illness, to provide outpatient follow-up upon discharge;
- 8. Participating in specified program development and/or program evaluation projects: and
- 9. Working closely with psychiatrists and psychopharmacologists who provide management of patients' psychotropic medications, interns have the opportunity to increase their psychopharmacology knowledge base.

Inpatient Mental Health

General Description: This rotation provides a supervised work experience on a 30-bed, acute care, general psychiatric unit. The inpatient unit provides treatment for patients with a wide range of psychiatric symptoms. The treatment model is that of the interprofessional team approach within a therapeutic community. The professional disciplines represented on the unit include: Psychiatry, Psychology, Nursing, Social Work, Occupational Therapy, Recreational Therapy, Kinesiotherapy, Chaplaincy, and Dietetics. The program is designed to address the psychological, behavioral, physical, and social problems presented by the patient and includes participation in patient evaluation, assessment, treatment planning, intervention, and follow-up. Supervision is provided by the psychologist, however, the psychiatrists, nursing personnel, recreation therapists, and social workers are available for consultation. Emphasis is placed on interaction and personal involvement with staff and patients. An additional focus would be training in the delivery of appropriate evidence-based interventions on the inpatient unit (e.g. motivational interviewing) and education on evidence-based psychotherapeutic interventions appropriate for the outpatient setting.

The inpatient psychiatry rotation provides an inpatient setting to be exposed to and learn about the process of crisis intervention, patient stabilization and discharge preparation services with patients in need of intensive psychiatric services. The inpatient unit provides intensive mental health services to approximately thirty new admissions every two weeks. It is designed to meet the needs of adult inpatients who present with crisis conditions including substance abuse, homicidal or suicidal risk, or the onset of severe psychiatric symptomatology in terms of mood fluctuations, anxiety or psychosis. This rotation provides an opportunity to learn about a variety of DSM-5 diagnostic categories and evidence-based approaches to treatment.

An interprofessional team approach is utilized to screen new admissions and determine treatment planning via daily treatment team meetings. Treatment team disciplines including psychiatry, nursing, psychology, social work, recreation therapy, dietary, occupational therapy, kinesiotherapy, and Chaplaincy are represented. The treatment team coordinates efforts to provide service delivery and communicate goals and objectives through a computerized treatment document. Opportunities to participate in this team-based approach to treatment and provide input will be provided via the treatment team documents.

In addition to learning about the team-based model, independent functioning while being supervised in direct service delivery with Veterans will be utilized. Specifically, increased participation in both group and individual therapy sessions as skill sets progress in the areas of assessment and intervention methods utilized in this setting. On-site supervisor will provide training to obtain mastery of empirically-supported treatments. Part of the training will require literature reviews and education in the areas of psychotropic medication, ethical concerns related to inpatient admissions, multicultural considerations, legal implications of assessment and treatment options, consultation to staff and families, and outpatient service delivery. Patient-centeredness will be a central focus of training throughout the process.

Evidence-based practices are emphasized, providing opportunities to learn and implement approaches such as cognitive processing therapy and motivational interviewing. In addition, health behavior related approaches to treatment in this setting will also be reviewed, including tobacco cessation and stress management. Empirically validated treatments are the focus of group sessions including cognitive behavior therapy, behaviorally-based approaches, and coping skills training. Skills will be learned and performed while being supervised on the unit.

All internship activities are supervised by a licensed psychologist on site. Opportunities to observe the psychologist in both group and individual sessions, in treatment team planning, and in consultation sessions with staff and families will be provided. In addition, interns will have the opportunity to perform these skills and obtain feedback as they achieve competencies. Responsibilities consist of weekly assignments including literature reviews, report and progress note preparation, and group and individual therapy session preparation. The inpatient rotation also allows for the opportunity to observe and learn the transition process and network with other disciplines as Veterans make progress and are discharged home or transition to other placements. Thus, teaching the importance of continuity and planning of outpatient service provision is a part of this training setting.

- Attending/participating in regular team activities, such as interprofessional treatment team meetings, which occur several times weekly. Attending administrative meetings with the Chief of Psychiatry and serve the purpose of assessing program needs and development;
- Serving as primary or cotherapist in ongoing short-term groups and individual psychotherapy;
- 3. Documentation of patient progress and the results of standardized psychological assessment;
- Participating in both the development and implementation of psychoeducational groups designed to address patients' needs (e.g., communication, PTSD, coping skills, stress mamagement, discharge planning, and family support);

- 5. Providing assessment and treatment to Veterans with PTSD and co-occurring disorders, including substance abuse. Treatment may include skills education targeting acute and chronic symptoms of the disorder (e.g., grounding, breathing, progressive muscle relaxation, meditation, and guided imagery) and psychoeducation regarding specific disorders for patients when receiving an initial diagnosis. Identifying availability of local and national treatment resources is emphasized, in addition to steps necessary in initiating placement when indicated; and
- 6. Participating in the assessment of patient need by creating groups and activities which meet the specific needs of the population, including patients with cognitive decline as well as individuals who may be diagnosed with both a major mental illness and a personality disorder.

Posttraumatic Stress Disorder (PTSD) Clinical Team

General Description: The PTSD Clinical Team consists of an outpatient specialty clinic serving Veterans with psychological issues related to military trauma. The interprofessional treatment team represents the following disciplines: Psychiatry, Psychology, Nursing, Social Work, Occupational Therapy, Recreational Therapy, and Chaplaincy. The clinic staff psychologists will serve as the primary clinical supervisors of the psychology intern rotating through the clinic. Training would emphasize participation in collaborative relationships and interventions with the interprofessional team. An additional focus would be training in the delivery of appropriate evidence-based interventions in this clinic (e.g. cognitive processing therapy, prolonged exposure therapy, cognitive behavioral therapy for insomnia)

The PTSD Clinical Team provides the opportunity to work with Veterans from different war eras and to learn therapies that are at the forefront of PTSD treatment. The PTSD Clinical Team allows the interns to work in an environment in which the patient feels safe and promotes mental health recovery. Education will be provided pertaining to the development of treatment plans that reflect clinical interventions that are designed to facilitate the Veteran's achievement of their goals and aspirations. Training would emphasize diagnostic assessment, test administration and interpretation, treatment plan development, group therapy and individual therapy. Therapies offered include both supportive and coping focused interventions (i.e. anger management, stress management) and evidenced based interventions in both individual and group formats (if available). The clinic promotes an evidence based treatment focus with systematic education, offering, and delivery of empirically supported treatments.

A new and innovative focus of the PTSD Clinical Team is the wellness and recovery phase of treatment typically offered after successful completion of evidenced based therapy. The wellness and recovery treatment phase incorporates a range of therapeutic activities aimed toward maintenance of treatment goals, socialization and introduction to a positive and healing life focus. Specific offerings during this phase include: yoga, mindfulness training, expressive art, spirituality groups, education in use of modern technologies to support and maintain treatment goals, assistance with engagement in meaningful and productive activities, and participation in social activities. All therapies are recovery-oriented, personcentered and emphasize empowering the patient taking control of treatment.

All internship activities are supervised by a licensed psychologist on site. Interns will have the opportunity to observe the psychologist in both group and individual sessions, in treatment team planning, and in consultation sessions with staff and families. In addition, opportunities will be provided to perform these skills and obtain feedback as competencies are achieved. Responsibilities for weekly assignments include literature reviews, report and progress note preparation, and group and individual therapy session preparation.

Potential Training Opportunities:

- Conducting comprehensive psychodiagnostic interview-based assessment;
- Conducting individual psychotherapy, including evidenced based therapies (EBTs) such as Prolonged Exposure (PE), Cognitive Processing Therapy (CPT), and Cognitive Behavioral Therapy for Insomnia (CBT-I);
- 3. Facilitating and co-facilitating group psychotherapy (e.g., Symptom Management, Anger Management, Seeking Safety, Loss and Transition);
- 4. Developing and implementing specialized treatment (e.g., grief resolution, treatment of nightmares, or mindfulness therapy);
- 5. Participating in interprofessional treatment;
- 6. Consult management and treatment planning; and
- 7. Participation in routine outcomes monitoring.

MINOR MENTAL HEALTH ROTATIONS

Polytrauma/Post-Deployment

General Description: The Polytrauma/Post-Deployment rotation is a minor rotation that offers interns the opportunity to observe and participate in the weekly TBI clinical team evaluation process which offers a second-level (after veterans have screened positive for traumatic brain injury) evaluation of TBI. General outpatient psychotherapy services are also provided to veterans in the post-deployment clinic.

As the polytrauma team at the Alexandria VAHCS is a tertiary (Level 3) point of care for TBI, the vast majority of cases coming through the clinic evince history of mild traumatic brain injury (with possible residual neurocognitive sequelae and/or a postconcussional syndrome presentation). Moderate to severe cases of traumatic brain injury with considerable functional impairment attributable to their head injury event(s) are transferred to Level 1 and Level 2 centers for evaluation and rehabilitation. Interns will have the opportunity to develop and refine skills at brief psychological screening/triage via semi-structured interview and self-report measures of psychopathology. Interns will also have the opportunity in the TBI clinic to follow veterans through the multiple brief evaluations by members of the interdisciplinary team during the evaluation process and to participate in team meetings, contributing important mental health information to the team to facilitate appropriate generation of referrals for more intensive levels of mental health services as needed.

Interns may also elect to work under the supervision of the polytrauma psychologist (one day or half-day per week) in the post-deployment clinic providing assessment and treatment services to veterans presenting with a wide range of psychopathology including posttraumatic stress disorder, major depressive disorder, and alcohol/substance use disorders. Interns will have the opportunity to utilize structured cognitive behavioral interventions for various presenting issues including: anger management, insomnia, relapse prevention, behavioral activation, facilitating resilience/recovery following trauma, and general cognitive-behavioral techniques to address presenting issues.

- 1. Develop basic knowledge regarding traumatic brain injury (with emphasis on assessment/treatment considerations pertinent to the general clinical psychological practitioner) by participating in an interprofessional team process of TBI evaluation
- Develop knowledge/skills in understanding the TBI literature (with emphasis on mild TBI) and its implications for psychotherapeutic treatment including modifications of delivery of standard cognitive-behavioral interventions
- 3. Develop skills in performing brief mental health triage assessments as part of a interprofessional health care team for a specific purpose (TBI-DIGMA evaluations)

- Develop skills in delivering outpatient cognitive-behavioral therapy to post-deployment and polytrauma populations with common presenting issues of PTSD, mild TBI, Major Depressive Disorder
- Develop skills in applying empirically supported principles of behavior change (ESP's) in a nonstandard (e.g., not weekly) context of service delivery (less frequent sessions necessitated by client preferences/availability)

Home-Based Primary Care

General Description: Home Based Primary Care (HBPC) is under Extended Care and patients are seen in their residential setting by the following disciplines: Chaplain, Dietitian, Nursing Staff, Physical Therapist Primary Care Provider (Nurse Practitioner or Physician), Psychologist, and Social Worker. Typically, Psychologists are making home visits by themselves unless there are any types of concerns that would warrant the company of another staff member. Contrary to the other HBPC disciplines, there is no recommended follow-up frequency for Psychology appointments and the scheduling is done by the Psychologist based on clinical opinion, treatment needs, and workload. The HBPC treatment team works closely together and meets twice each week for Interdisciplinary Team Meetings (IDT's) on Tuesday and Thursday mornings where patients and their needs are discussed by the various disciplines.

HBPC patients are typically homebound Veterans with a variety of chronic medical issues that make regular attendance of their appointments difficult or impossible. The majority of our HPBC patients is geriatric but we also have several individuals in our program who are younger and are considered homebound due to the severity of their medical conditions, such as locked-in syndrome or cardiovascular accidents. Other health issues to consider are hearing loss or cognitive impairments due to Dementia or Alzheimer's disease. These conditions can make therapy challenging but also provide with an invaluable experience for dealing with the special issues of the elderly population and being creative in communicating. Several of our patients live independently and have a lack of social support which is frequently addressed during psychology sessions.

A large number of HBPC patients live in rural settings with their families and spouses. Frequently family members are present during the psychology sessions with the consent of the Veteran. Many of the patients have had no previous experience with mental health and are often struggling with stereotypes of psychological care that have to be addressed by the treating provider. Therefore, rapport building is the most important first step with this population in order to make the Veteran and their family feel comfortable with mental health providers visiting their homes.

The minor HBPC rotation provides the ability to deepen knowledge about cultural diversity, providing psychotherapy in a more unstructured setting, complete cognitive screening assessments, monitor for signs of abuse and report incidents of such, and also refer to other disciplines, if needed.

- 1. Providing services to patients with a variety of disorders and medical issues;
- 2. Provide therapy to a diverse population of veterans and their families in a more unstructured setting;
- 3. Administer and interpret cognitive assessments:
- 4. Participating in interprofessional treatment;
- 5. Consult management and treatment planning.

Pain Management

General Description: The Pain Management Specialty Clinic is a collaboration between Physical Medicine & Rehabilitation Service and Psychology Service. Patients are evaluated by both a medical provider and a psychologist simultaneously. This interprofessional assessment provides the opportunity to approach pain management from two different perspectives, medical and psychological. The psychologist's role is to present non-medication alternatives when appropriate. Psychologists identify possible mental health barriers that may be interfering with effective pain management. If such barriers are identified as a potential issue, patients are referred via consult to psychology for a more comprehensive evaluation of mental health needs. In addition, mental health treatment options are presented including individual pain management sessions or group pain management sessions. If veterans already have a mental health provider, the provider is notified to alert them so that they can address, if deemed necessary, or further evaluate the impact of these barriers. Interns will have the opportunity to observe the comprehensive medical assessment process as well as the psychological interview and presentation of alternatives to treatment. They can also assist in the evaluation of pain ratings, in the review of psychiatric treatment profiles and overall chart review. Finally, they can observe and participate in the progress note writing and recommendations.

Potential Training Opportunities:

- 1. Work concurrently with a medical provider to evaluate clients;
- 2. Explore and review alternatives to medication management for pain;
- 3. Assess and identify potential barriers to effectively managing clients pain;
- 4. Facilitate individual or group therapy for pain management;
- 5. Participate in interview, note writing and chart review of clients.

Substance Use Disorder Services (SUDS)

General Description: SUDS is a specialized Intensive Outpatient treatment program (IOP) of Mental Health Services aligned under Psychology Services which provides comprehensive, integrated, cost effective medical, psychiatric, and psychosocial services to eligible Veterans who have active substance use disorders. Interns will participate as a member on an interprofessional team and serve in the roles of provider, group facilitator, liaison, and or consultant, Interns will learn how to assess substance use disorders. Exposure to withdrawal management, use of appropriate psychotropic medications, and pain management in the addicted patient will also be available. The interprofessional team provides integrated health care and utilizes evidence based programs such as Cognitive Behavioral Therapy, Matrix Model. Motivational Interviewing, group therapy, and Contingency Management. Interns will experience working with a variety of substance use and recovery concerns across a range of recovery phases (relapse prevention, stabilization, early recovery, maintenance, and relapse), in addition to a number of cooccurring disorders or health issues such as HIV and other health issues Veterans may be at risk. Cooccurring disorders may include but are not limited to anxiety, trauma, mood disorders, and PTSD. Interns will also have the opportunity to work with Veterans who also enter treatment after completing a residential program and return to SUDS to participate in the Aftercare portion of the SUDS program. Interns have the opportunity to shadow professionals and work independently in an individual, group, or family format.

- 1. Participate on an interprofessional team to assess and treat substance use disorders;
- 2. Learn and implement psychoeducation, interventions, and treatment plans with this population;
- 3. Assess and identify potential barriers to effectively maintaining a substance free lifestyle;
- 4. Facilitate individual or group therapy for relapse prevention, stabilization, and maintenance;
- 5. Participate in interview, note writing and chart review of clients.

Other Supervised Training Experiences

Any roles that are attributed to psychologists in professional practice are appropriate training activities during the internship. Specifically, these include assessment, interviewing, psychotherapy, consultation, administration, program development, and training. While not all of these experiences may necessarily be gained during the internship, the majority can be gained over the course of the internship through rotation assignments and psychotherapy and assessment casework.

Supervision

Supervision is provided both formally and informally during the internship year. In keeping with APA and APPIC standards, a *minimum of four hours (including at least 2 hours of individual supervision)* of formal supervision is scheduled each week. Many additional hours are accumulated and logged through informal or extra scheduled time.

Supervision is provided as follows:

Director of Training: Leslie Drew, Ph.D.

- Provides general administration of internship
- Provides supervision related to the administrative tasks and professional development
- Develops and maintains supportive relationship with interns
- · Coordinates the didactic program
- Contributes to the evaluation of the interns
- Oversees completion of competencies and minimum requirements
- · Chairperson, Psychology Internship Training Committee

Rotation Supervisor(s):

- · Integrates activities of intern with rotation staff
- Supervises intern's rotation-related administrative responsibilities
- Participates with intern in co-therapy/co-assessment as appropriate
- Oversees initiation and completion of rotation contracts
- · Serves as case supervisor for ongoing psychotherapy and/or assessment cases
- · Provides specific (patient-focused) supervision of the therapy cases
- Oversees progress of intervention/assessment competencies

Peer Supervision:

- Provides intern opportunity for peer support/bonding
- Encourages opportunity for networking

Group Supervision:

- Training Director or other group supervisor meets with interns to discuss intern class issues, professional development issues, administrative issues, and journal articles on ethics, practitionerscholar models, etc.
- Weekly group supervision will allow interns to discuss their development and challenges in a safe and collegial environment of mutual respect. It will also provide a structured opportunity to progressively participate in consultative and peer supervisor roles, providing graduated experiences of professional responsibility and independence.
- Supervisors for the group sessions may rotate to facilitate interns' maintenance of professional relationships with multiple supervisors. This will also allow interns to experience in greater depth differing styles and philosophies of supervision as they are modeled by multiple mentors from the psychology staff.

Didactics

A minimum of 2 hours each week are designated for attendance at required didactic activities. Attendance and participation in these activities is mandatory and takes precedence over service delivery activities or other meetings. These seminars are conducted by psychology staff members, other disciplines from the medical center, and community professionals, with topics varying from year to year depending on programmatic issues and intern needs/interests.

<u>Assessment Seminar</u>: This seminar focuses on enhancing intern's psychological assessment skills and covers a wide spectrum of assessment including diagnostic interviewing, mental status examinations, differential diagnosis, functional assessment, specialty clinical assessments, and neuropsychological assessments. This seminar will enhance interns' abilities to integrate a wide range of data from assessment in order to make a differential diagnosis with cogent treatment recommendations.

<u>Psychopathology/Psychotherapy Seminar:</u> This seminar focuses on enhancing interns' psychotherapy skills and covers a wide spectrum of issues and perspective in individual and group psychotherapy practice. The impact of the therapeutic alliance on the therapist as well as the patient is examined. Participants are encouraged to share their personal experiences of clinical work. This seminar is based on the national VHA trainings designed for providers. This series will provide an overview of theory and specific interventions for several evidence-based practices including Prolonged Exposure (PE), Cognitive Processing Therapy (CPT), and Cognitive-Behavioral Therapy for Insomnia (CBT-I). This seminar covers the foundational topics in a variety of specialty areas including suicide prevention and assessment,

<u>Cultural Diversity Seminar:</u> This seminar explores the cultural variations occurring most frequently in the medical center's patient population and attempts to raise awareness of the impact of culture on the client/therapist relationship.

<u>Ethics/Professional Seminar:</u> This series focuses on issues surrounding professional issues and ethical conduct.

<u>Interns' Conference</u>: A regular Interns' Conference will initially be facilitated by training staff, with interns taking progressively greater responsibility for planning and conducting the conference as the training year goes on. Each intern will be expected to give at least one case presentation and one scholarly presentation (presumably including their own dissertation research). This will provide structured, organized experience in consultation, scholarly inquiry, and professional presentations.

<u>Scholarly Inquiry</u>: Time may be allowed for interns to prepare presentations for Interns' Conference. Interns will have access to the Alexandria VAHCS library to support these efforts.

Interns will have opportunities and be encouraged to attend other events within the medical center to broaden interprofessional training experiences. These will include, but not be limited to, shadowing non-psychology providers, attending medical staff meetings, and educational conferences.

Requirements for Completion

Essentially, when we say an intern has completed their internship, we have decided that they can function independently within their scope of competence and level of development for an entry-level psychologist in a healthcare setting. To complete the internship, interns must met the following requirements:

- 1. The internship requires successful completion of a full year of training, consisting of a minimum of 2,080 employment hours to be completed in no less than one calendar year (including earned sick and annual leave and federal holidays).
- 2. Interns must satisfactorily pass all three mandatory rotations comprised of Behavioral Health Interprofessional Program, Inaptient Mental Health, and Post-Traumatic Stress Disorder (PTSD) Clinical Team and any minor rotations completed
- 3. The intern must have Trainin Committee Consensus that the intern is at proficiencu level of "Entry Level Psychologist" at internship completion as evidenced by rating of "4" or more on the final evaluation of intern performance.
- 4. The intern must have successful completion of all competency exercises as evidenced by a score of at least 80%.
- 5. Interns must be in "good standing" and removed from probationary status.

Due Process

All Interns are afforded the right to due process in matters of problem behavior and grievances. A due process document is distributed to and reviewed with all interns during their first week of orientation at the Alexandria VAHCS.

Facility and Training Resources

A number of resources are available to interns at the Alexandria VAHCS. Interns are provided an office equipped with networked personal computers, providing easy access to patients' computerized medical records, e-mail, and internet, in addition to facilitating report and note writing. A broad range of assessment materials are available in paper form and/or through the computerized mental health testing package. Library facilities include the Medical Center's professional library as well as online resources. Assistance with literature retrieval is provided through the Medical Center's professional library. Parking is available close to the medical center and exercise facilities are available to interns.

Training Faculty

Gina Beverly, Ph.D., ABPP-CN, Board Certified Neuropsychologist

Louisiana Tech University, 2007 Licensed Psychologist, Louisiana Lafayette CBOC

Marceline Brown, Ph.D. Clinical Psychologist

University of Southern Mississippi, 2003 Licensed Psychologist, Maryland PTSD Clinical Team

Lori A. Carroll, Ph.D. Clinical Psychologist

Tulane University, 2002 Licensed Psychologist, Louisiana Inpatient Mental Health

Norma J. Charles, Psy.D. Clinical Psychologist

Indiana University of Pennsylvania, 1996 Licensed Psychologist, Florida SUDS Coordinator and Supervisor

Leslie R. Drew, Ph.D. Clinical Psychologist

University of Mississippi, 1993 Licensed Psychologist, Mississippi PTSD Clincal Team Coordinator, Psychology Training Program Director

Catherine Hansen, Ph.D. Clinical Psychologist

University of Rhode Island, 1992 Licensed Psychologist, Louisiana and Connecticut Military Sexual Trauma Coordinator, Natchitoches CBOC

Joseph A. Lamanna, D.Ed. Clinical Psychologist

The Pennsylvania State University, 1983 Licensed Psychologist, Louisiana Compensation and Pension

Julia Lott, Ph.D. Clinical Psychologist

Louisiana State University, 2006 Licensed Psychologist, Louisiana Women's Clinic

Kelley S. Pears, Ph.D. Counseling Psychologist

University of Southern Mississippi, 1994 Licensed Psychologist, Louisiana PTSD Clinical Team/SUDS Coordinator

Troy Raffield, Ph.D. Clinical Psychologist

University of Louisville, 2003 Licensed Psychologist, Louisiana Post-Deployment Mental Health Clinic

Pedro Rivera, Psy.D. Clinical Psychologist

Carlos Albizu University, 2004 Licensed Psychologist, Puerto Rico PTSD Clinical Team, Evidence Based Psychotherapy Coordinator

Birgit Smart, Ph.D. Counseling Psychologist

Louisiana Tech University, 2009 Licensed Psychologist, Louisiana Home Based Primary Care

Jennifer Tucker, Psy.D. Clinical Psychologist

Forest Institute of Professional Psychology, 2008 Licensed Psychologist, Louisiana Mental Health Outpatient Clinic

Adjunct Training Faculty

Raelena Crooks, OTR/L, M.Ed.

Board Certified in Occupational Therapy, Mental Health Specialty

David Daniel, Ph.D. Clinical Psychologist

Wilfred Gallien, LPC

PTSD Clinical Team Psychology Technician

William Hedrick, M.D.

Certified Yoga Instructor

Michael S. LaCour, MCMHC

Substance Use Disorder Clinic, Social Science Program Specialist

Verena McGinnis, APRN, APMHNP-BC

PTSD Clinical Team Nurse Practitioner

Harvey Norris, LCSW, CBA

Suicide Prevention Coordinator

Dana Pollard, Ph.D. Clinical Psychologist

Lynetta B. Reid, M.S.

Psychology Technician Inpatient Mental Health

Tamara Diane Richardson, MSW, LCSW, BACS, CCM

Post-Deployment Health Care Coordinator

Dana Rippy, MSW, LCSW

PTSD Clinical Team Social Worker

Fay C. Thrasher, Ph.D. Clinical Psychologist

Chief, Psychology Service, Smoking Cessation Coordinator

Sherri Transier, Ph.D. Counseling Psychologist

Douglas A. Wigginton

Chief, Chaplain Service, Clinical Pastoral Education Supervisor, Certified Supervisor, Association of Pastoral Education, Inc.

Living in Central Louisiana (CENLA)





Amphitheatre on the Red River (Wikipedia.org)

Map of Louisiana (Slabbed.org)

Alexandria, Louisiana is a growing, vibrant and historical city along the south bank of the Red River in the geographical center of the state. It has a population of approximately 48,000 residents. Due to Alexandria's location within the center of the state, it serves as the retail, business, health care and transportation hub of a nine parish (county) region of more than 400,000 people. Alexandria has three colleges located within it: Louisiana State University at Alexandria is a regional campus of Louisiana State University, Louisiana College is a private Southern Baptist University, and there is also one of the Region 6 Louisiana Technical College campuses.

Alexandria is a small Southern city with many amenities commonly found in large cities including an airport, two award-winning hospitals, and one of the best small zoological parks in the country. There are five golf courses including The Links on the Bayou, which was named Best Public Course in Louisiana by Golf Digest. Alexandria was also named one of the top ten "wilderness towns" in the nation by the National Geographic Traveler. Alexandria contains the Alexandria Museum of Art, Arna Bontemps African American Museum. Louisiana Historical Museum. Kent Plantation House and Cultural Arts Center. There are several annual cultural events and festivals including Mardi Gras, Cenlabration, and Riverfest, which typically include music and cultural food in addition to event specific features.

In addition to being a great place for family, Alexandria is a great place for businesses and was named one of the "20 Best Cities for Finding a Job" by Business Insider and is seventh in the country for oneyear job growth and tenth for one-year wage and salary growth. Alexandria is a small town that is regularly expanding.

For more information, please visit: http://www.cityofalexandriala.com/ http://www.pineville.net/ http://www.alexandria-louisiana.com/